

STATE OF DELAWARE
MOTOR FUEL TAX ADMINISTRATION
COMMON AND CONTRACT PETROLEUM PRODUCTS CARRIER REPORT

SCHEDULE _____A

PAGE 1 OF _____

THIS REPORT MUST BE FILED (US POSTMARKED) BY THE 25TH DAY
OF EACH MONTH FOLLOWING THE MONTH BEING REPORTED.
FAILURE TO FILE REPORTS OR PAY LATE FILING PENALTIES COULD
RESULT IN THE REVOCATION OF YOUR OPERATING PRIVILEGES.

REPORT MONTH _____

COMPANY NAME: _____
ADDRESS: _____
FEIN: _____
PHONE #: _____
F AX #: _____

SIGNATURE AND VERIFICATION: I CERTIFY THAT UNDER THE
PENALTIES OF PERJURY THAT THIS REPORT HAS BEEN EXAMINED BY ME
AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND
COMPLETE RETURN.

PRINT NAME

SIGNATURE TITLE

PRODUCT TYPE (CIRCLE ONE)

- | | | | | | |
|-----|-------------------|-----|----------------------|-------|-----------------------------------|
| 65 | GASOLINE | 130 | Jet Fuel | 226 | High Sulfur Diesel Fuel - Dyed |
| 124 | GASOHOL | 161 | Low Sulfur Diesel #1 | 227 | Low Sulfur Diesel Fuel - Dyed |
| 125 | AVIATION GASOLINE | 167 | Low Sulfur Diesel #2 | _____ | Other (see FTA product code list) |

PERSON HIRING THE CARRIER		SELLER				DELIVERED TO					
1	2	3	4	5	6	7	8	9	10	11	
COMPANY NAME	FEIN	COMPANY NAME	FEIN	MODE	ORIGIN	NAME	ADDRESS	FEIN	DATE DELIVERED	DOCUMENT NUMBER	

DATE _____

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